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## TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

Total Number of Pages in This Submission **4** Attorney Docket Number **034299-648**

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Postcard, Issue Fee Transmittal (1 pg.), Applicant's Comments on Reasons for Allowance (2 pgs.)
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Thelen Reid Brown Raysman & Steiner LLP		
Signature			
Printed Name	Khaled Shami		
Date	01/07/2008	Reg. No.	38,745

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Julie Arango	Date	01/07/2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



PATENT  
Serial No. 10/538,421  
Atty. Docket No.: 034299-648

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT: Moustapha Hafez et al. CONFIRMATION NO.: 3619  
SERIAL NO.: 10/538,421  
FILING DATE: 06/09/2005  
TITLE: MULTI-LAYER TOUCH DISPLAY DEVICE COMPRISING  
ELECTROMAGNETIC ACTUATORS  
EXAMINER: Chowdhury, Afroza Y.  
ART UNIT: 2629

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**CERTIFICATE OF MAILING**

I hereby certify that this paper is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450, on the date printed below:

Date: 01/07/2008

Name: Julie Arango  
Julie Arango

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**Mail Stop Issue Fee**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria VA 22313-1450**

**APPLICANT'S COMMENTS ON REASONS FOR ALLOWANCE**

Dear Sir:

Applicant gratefully acknowledges the indication of allowance of Claims 1-14. Applicant respectfully urges that the reasons for allowance of Claims 1-14 are not limited to those provided in the Notice of Allowance mailed October 5, 2007 or in other communications from the Patent Office, including any Interview Summary Records, and that additional reasons for allowance may exist, each of which may be independently sufficient to establish the patentability of one or more of Claims 1-14.

Applicant respectfully reserves the right to introduce, articulate, or otherwise comment on any such additional reasons for allowance as may be appropriate in any future proceedings concerning the claimed invention.

Please charge any additional required fee or credit any overpayment to our deposit  
account number 50-1698.

Respectfully submitted,  
THELEN REID BROWN RAYSMAN & STEINER LLP

Dated: 01/07/2008

  
Khaled Shami  
Reg. No. 38,745

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